U.S. Fish and Wildlife Service
Program Purchase Request (New Requirement)

You must complete the following document to submit a purchase request to the Financial and Business Management System (FBMS) Requisitioner. After you have completed all fields below, this request must be approved by the program office Supervisory Approver and Certifying Funds Approver, then submitted to the FBMS Requisitioner. **Be sure to complete the entire form before inserting a digital signature. You will not be able to make further edits after the form has been digitally signed.**

Program Purchase Request (PPR) Requisitioner Information

Name: _____ _____ _____
      (Last)   (First)   (MI)

Phone Number: _____ **Program Office/Field Office:** _____

For internal program use only

Internal Reference No.: _____ **Requester Name:** _____ **Phone:** _____

Additional Ad Hoc Approver: (for use outside of FBMS) _____ _____
                                                            (Last)   (First)

Purchase Request (PR) Header Information

This is a Law Enforcement IT purchase and requires IT approval from Law Enforcement Specialist (mapped to ACQ_AO_IT role)

Use this space to address any additional information relevant to the PR, such as: the GSA, IDIQ, BPA, or other known contract number; the name of the Buyer/Contracting Officer of the IDIQ or BPA if this is a TO/DO or BPA call; the name/phone number of the DOI-certified Contracting Officer's Technical Representative; indication as to whether this request is subject to the availability of funds (SAF).

Customer Data Tab

PR Title: _____

PR Type: (check one)

    Funded (POs, Contracts, Awards marked "SAF", TOs/DOs, BPA calls, Inter-Agency Agreements)
    Unfunded (BPAs, IDIQs, BOAs) *Note: Not for awards marked "SAF"*
    Autochoice
    Intra-Agency Agreement
    Financial Assistance

This a pre-award change to a PR

This is a ratification

Delivery Date: (must be future date)

_____ [mm/dd/yyyy]

FBMS Receiving Official/COR: _____ _____
                                          (Last)   (First)

Originating Office (Requisitioner's Office): _____
                                                      (Address - Line 1)

                                          _____
                                                     (Address - Line 2)

                                          _____ _____ _____
                                           (City)   (State)   (Zip code)

Originating Office Code: _____ **GSA/Other Known Contract Number:** _____

If a specific Supervisory and/or Ad Hoc Approver must review the PR in FBMS, include names below (not a required field).

FBMS Supervisory Approver: _____ _____
                                       (Last)   (First)

FBMS Ad Hoc Approver: _____ _____
                                       (Last)   (First)

FBMS IT Approver (Law Enforcement): _____ _____
                                       (Last)   (First)

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Line Item Data

Line No.	Good (ea) or Service (au)	Description (Max. 40 Characters)	Qty. (#) (For Services, enter "1")	Unit Price*	BOC and PSC/UPC (if known)	Delivery Date (mm/dd/yyyy)	Purchasing Group	Subj. to Avail. of Funds? (Y/N)	Line Total
10									
20									
30									
40									
50									
60									
70									
80									
90									
100									
110									
120									
130									
140									
150									
Total									

*Note to FBMS Requisitioner: For service line items, you must enter "D" in the item category field to access the limits tab where you will enter the price.

If extra lines are needed, provide additional items and corresponding required information on a separate page as an attachment.

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Suggested Vendors:
(Include DUNS numbers if known)

Custodial Property Officer Name: _____ _____
(assets only)   (Last)   (First)

Approval Signatures

Provide digital signatures below after all other fields are completed. Handwritten signatures and approvals via email are also acceptable. If approving via email, make sure to include as an attachment.

PPR Supervisory Approver: _____ **PPR Certifying Funds Approver:** _____
                              (Signature)   (if necessary)   (Signature)

Account Assignment Tab/Limits Tab

Line No.	% or Quantity Allocated	Cost Center or Work Order	Partial Fund	WBS (project code)	
					Note: If a particular line item is funded by multiple WBS codes, enter those WBS codes in the table to the left. The "Line No." in this table should correspond to the "Line No." of the item in the table above. A new row should be completed for each WBS code.
					If split by dollar amount, the funding will deplete evenly from each of the accounts until the request has been paid in full. The FBMS system does not allow for one funding account to fully deplete before depleting the second account or for the Requistioner to control the order of use of funds. If it is important to deplete funding in a certain order rather than depleting all funds proportionally, it is recommended that a separate line is created for each funding line.
					It is recommended that items with multiple lines of accounting be split by percentage rather than by dollar amount due to errors in the system when splitting by dollar amount.
If extra space is needed, provide additional accounting information on a separate page as an attachment.					

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Delivery Address Tab

If using multiple delivery addresses, please specify corresponding line item numbers.

Delivery Address 1: _____
(Address – Line 1)

In reference to _____
Line Item No.: (Address – Line 2)

_____ _____ _____ _____ _____
(City) (State) (Zip code) (Phone number)

Delivery Address 2: _____
(Address – Line 1)

In reference to _____
Line Item No.: (Address – Line 2)

_____ _____ _____ _____ _____
(City) (State) (Zip code) (Phone number)

Delivery Address 3: _____
(Address – Line 1)

In reference to _____
Line Item No.: (Address – Line 2)

_____ _____ _____ _____ _____
(City) (State) (Zip code) (Phone number)

Delivery Address 4: _____
(Address – Line 1)

In reference to _____
Line Item No.: (Address – Line 2)

_____ _____ _____ _____ _____
(City) (State) (Zip code) (Phone number)

Delivery Address 5: _____
(Address – Line 1)

In reference to _____
Line Item No.: (Address – Line 2)

_____ _____ _____ _____ _____
(City) (State) (Zip code) (Phone number)

If extra space is needed, provide additional delivery information on a separate page as an attachment.

Public Sector Tab

Period of Performance: _____ [mm/dd/yyyy] _____ [mm/dd/yyyy]
(Start date) (End date)

Documents Attached: (check all that apply)

- Additional Accounting Information
- Additional Delivery Information
- Additional Line Items
- Drawings, Maps, Illustrations
- FISMA (IT Requirements)
- Independent Government Estimate
- Justification for a Non-Competitive Requirement (FAR 6.302-1)
- PPR Approvals
- Quotes/Market Research

- Request for Reprographic Equipment
- Statement of Need (IT Requirements)
- Statement of Work: Performance Based or Other
- Section 508 Compliance (IT Requirements)
- Suggested 8(a) Vendor
- Technical Evaluation Criteria
- Technical Evaluation Proposal Committee
- Other: _____
- Other: _____

FWS Form 3-2428

<div align="center">Using the Program Purchase Request (New Requirement) Form</div>

General Instructions:

The PPR (New Requirement) form is used to submit requests for new purchase requirements to the Financial and Business Management System (FBMS) Requisitioner (ACQ_REQ). It must be completed by the requisitioning program office and approved by the PPR Supervisory Approver and Certifying Funds Approver before it can be submitted.

The PPR should only be used for purchases that require entry into FBMS (i.e., not for purchases that can be made using the Governmentwide commercial purchase card). PPRs that do not require FBMS entry will be rejected by the FBMS Requisitioner.

You must complete the entire PPR form prior to seeking necessary approvals. This is especially crucial when using digital signatures, as the form will not allow further edits to be made after it has been digitally signed.

Upon completion of the form, upload the saved PDF along with all applicable attachments to the [Program Purchase Request Submission site](#). Once the PPR is submitted, it will be assigned to an FBMS Requisitioner who will enter your request into FBMS for further action.

Program Purchase Request (PPR) Requisitioner Information Instructions:

Name: Enter your name (the name of the person filling out the form).

Phone Number: Enter your work phone number.

Program Office/Field Office: Enter the name of the office in which you work.

Internal Reference No.: If applicable, enter the document reference number used internally in your program office. *This field is optional.*

Requester Name: Enter the name of the end user of the required goods/services, if not yourself. *This field is optional.*

Phone: Enter the phone number of the requester listed above. *This field is optional.*

Additional Ad Hoc Approver: If applicable, enter the name of the individual who must provide supplemental approval of the PPR prior to submission. *This field is optional.*

Purchase Request (PPR) Header Information Instructions:

This is a Law Enforcement IT Purchase and requires IT approval from Law Enforcement Specialist: If applicable, select the checkbox and enter the name of the FBMS IT Approver (Law Enforcement) in the space provided in the Customer Data Tab.

Use this section of the form to address any additional information relevant to the PR. This text will appear in the header of the PR. The following items suggest possible information to include in the header:
- GSA, IDIQ, BPA, or other known contract number.
- The name of the Buyer/Contracting Officer of the IDIQ or BPA, if applicable.
- The name and contact information of the Contracting Officer's Technical Representative (COTR).
- Indication as to whether this request is subject to the availability of funds (SAF).

Customer Data Tab Instructions:

PR Title: Create a relevant title for your PR (e.g., "Fish Tanks" or "Janitorial Services").

PR Type: Select the PR type from the list below:
- **Funded:** Select if this request requires funding (e.g., purchase orders, contracts, awards marked "SAF", task orders, delivery orders, BPA calls, or inter-agency agreements).
- **Unfunded:** Select if creating a BPA, IDIQ, or BOA. Do not check this box if this request is SAF.
- **Autochoice:** Select if purchasing a vehicle via GSA Autochoice.
- **Intra-Agency Agreement:** Select if this is an intra-agency agreement.
- **Financial Assistance:** Select if this purchase request is for financial assistance.

This is a pre-award change to a PR: Select if applicable.

This is a ratification: Select if applicable.

Delivery Date: If purchasing goods, enter the delivery date. Note: Do not enter a delivery date if purchasing services.

FBMS Receiving Official/COR: Enter name of the FBMS Receiving Official/COR. This field is not applicable for Region 9.

Originating Office (Requisitioner's Office): Enter the mailing address of your program office/field office.

Originating Office Code: Enter the office code of your program office/field office.

GSA/Other Known Contract Number: If applicable, enter the GSA or other known contract number associated with this purchase.

FBMS Supervisory Approver: If this purchase requires supervisory approval, enter the name of the supervisor. *This field is optional.*

FBMS Ad Hoc Approver: If this purchase requires a level of approval other than Supervisory, Specialty Approvers (IT, RP, PP, FL), or a Funds Certifier, enter the name of the ad hoc approver (e.g., Law Enforcement approver for weapon purchases). The UPC will determine if ad hoc approval is needed. Note that FBMS only allows for one level of ad hoc Approval; any additional levels of approval must be done outside of the system. *This field is optional.*

FBMS IT Approver (Law Enforcement): If this is a Law Enforcement IT purchase and requires IT approval from a Law Enforcement Specialist, enter the name of the IT approver. *This field is optional.*

Line Item Data Tab Instructions:

Enter the line item information in the table provided. If using options, add each option as a separate line item.

Good (ea) or Service (au): Enter "ea" for "each" if you are purchasing goods. Enter "au" for "activity unit" if you are purchasing services. The system does permit the use of units of measure other than "ea" for goods.

Description: Enter a brief description of the line item.

Qty. (#): Enter the quantity of goods you are purchasing for that particular line item. If you are purchasing services, the quantity is always "1".

Unit Price: Enter the unit price of the line item.

BOC or PSC/UPC: Enter the Budget Object Code (BOC), Product/Service Code (PSC), or Universal Product Code (UPC) if known. Please reference the Top 30 BOC/UPC crosswalk or the Complete UPC Crosswalk.

Delivery Date: If purchasing goods, enter the delivery date for that particular line item.

Purchasing Group: Enter the purchasing group. See list of purchasing groups for acquisition and federal assistance.

Subject to Availability of Funds?: Enter "Y" if subject to availability of funds. Enter "N" otherwise. Note: Every line item should be marked individually.

Suggested Vendors: Enter the company names and DUNS numbers, if known, of the suggested vendors for this purchase. Please ensure suggested vendors are active in CCR.

Custodial Property Officer Name: If applicable, enter the name of the Custodial Property Officer.

Approval Signatures Instructions:

After completing the rest of the form, provide the signatures of the authorized Supervisory Approver (required on all PRs for all Regions) and Certifying Funds Approver (if required in your Region) in the space provided. Signatures can be provided digitally, by hand, or by attachment. If inserting a digital signature, be sure to complete the rest of the PPR form before doing so; you will not be able to edit the form after it has been digitally signed.

Account Assignment Tab/Limits Tab Instructions:

Enter the accounting data in the table provided. Use a separate row for each WBS code being used. If funding is split by dollar amount, the funding will deplete evenly from each of the accounts until the request has been paid in full. FBMS does not allow for one funding account to fully deplete before depleting the second account, or for the Requisitioner to control the order of use of funds. If it is important to deplete funding in a certain order rather than depleting all funds proportionally, it is recommended that a separate line item is created for each funding line. Note: Due to system errors, it is recommended that items with multiple lines of accounting are split by percentage and not by dollar amount.

Line No.: Enter the line number that corresponds with the appropriate line in the Line Item Data tab.

% or Quantity Allocated: Enter the percent or dollar amount allocated to that particular WBS code.

Cost Center or Work Order: Enter the cost center or work order code.

Partial Fund: Enter the partial fund code.

WBS (project code): Enter the WBS code.

Delivery Address Tab Instructions:

If purchasing goods to be delivered, use this section to provide delivery information. If using multiple delivery addresses, enter the corresponding line item numbers. If extra space is needed, provide additional delivery information on a separate page as an attachment.

Delivery Address 1: Enter the mailing address and phone number for the first destination.

Delivery Address 2: Enter the mailing address and phone number for the second destination, if applicable.

Delivery Address 3: Enter the mailing address and phone number for the third destination, if applicable.

Delivery Address 4: Enter the mailing address and phone number for the fourth destination, if applicable.

Delivery Address 5: Enter the mailing address and phone number for the fifth destination, if applicable.

In reference to Line Item No.: Enter the corresponding line item number(s) for each destination, if applicable.

Public Sector Tab Instructions:

Period of Performance: If purchasing services, enter the period of performance start date and end date.

Documents Attached: Select whether you are attaching any of the listed documents. If you are attaching a document that is not listed, select "Other" and write a brief description of the document.

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Acquisition Purchasing Groups:

Purchasing Group	Description
F01	Regions 1/8
F02	Region 2
F03	Region 3
F04	Region 4
F05	Region 5
F06	Region 6
F07	Region 7
F09	Region 9

Federal Assistance Purchasing Groups:

Purchasing Group	Description	Additional Information
FW1	Region 1 WSFR	
FW2	Region 2 WSFR	
FW3	Region 3 WSFR	
FW4	Region 4 WSFR	
FW5	Region 5 WSFR	
FW6	Region 6 WSFR	
FW7	Region 7 WSFR	
FW8	Region 8 WSFR	
FW9	Region 9 WSFR	
FBC	Division of Bird Habitat	Region 9 only
FPA	Partners for Fish and Wildlife	For national postings only – not for Regional users
FES	Endangered Species	For national postings only – not for Regional users
FIA	Division of International Affairs	Region 9 only
FDA	Natural Resource Damage Assessment, CERCLA	For national postings only – not for Regional users

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